



International Marine Minerals Society

APPLICATION FOR MEMBERSHIP

Full Name: _____ ' Dr. ' Mr. ' Ms.
(First) (Middle) (Last)

Title and Affiliation: _____

Full Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

Primary Interest in Marine Minerals: _____

Payment Options

☐ I am a student and have attached an abstract (approximately 100 words) of my area of study which has some relevance to marine minerals which qualifies me for a free one year membership to IMMS

☐ Enclosed is a check payable to IMMS for US\$15, drawn on a U.S. bank.

☐ Charge my MasterCard: _____ Expiration Date: _____

☐ Charge my VISA: _____ Expiration Date: _____

Signature and Date _____



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